## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

ATTORNEY'S DOCKET NUMBER 740-64 (LAM)

(Includes Reference to PCT International Applications)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

"PRESSURIZED FLUID NOZZLE" /

the	specification	of	which	(check	only	one	item	below	١:

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<u>·</u>	is attached hereto.	
	the first of the second of the second	
—	was filed as United States application Serial No.	
	on ·	
	and was amended	A
	on (if applica	able).
_ <u>x</u>	was filed as PCT international application	on
	Number <u>PCT/EP00/04691</u>	
	on 23 May 2000	
	and was amended under PCT Article 19	
	on 1 December 2000	(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim foreign priority benefit under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

## PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (If PCT indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Germany	199 28 418.0	23 June 1999	X YES NO
РСТ	PCT/EP00/04691	23 May 2000	_x_ YES NO
			YES NO
			YES NO
	·		YES NO

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Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)						ATTORNEY'S DOCKET NUMBER 740-64			
State in the Code	es of America the e manner provide	at is/are listed below ar ed by the first paragrap	nd, insofar as the subje h of Title 35, United Si	ect ma tates	any United States application atter of each of the claims of Code, §112, I acknowledge ing date of the prior application.	f this application is not the duty to disclose m	disclosed in that/those aterial information as	e prior application(s) defined in Title 37,	
PRIC	OR U.S. APPLIC	ATIONS OR PCT INT	TERNATIONAL APPL	ICAT	IONS DESIGNATING THE	U.S. FOR BENEFIT	JNDER 35 U.S.C. 1	20:	
u.s.	APPLICATION	s				STATUS (MARK ONE)			
U.S.	APPLICATION NUM	<b>IBER</b>	U.S. FILING DATE	U.S. FILING DATE		PATENTED	PENDING	ABANDONED	
	<del>.</del>								
PCT	APPLICATION	S DESIGNATING THE	.s.		<del></del>				
PCT APPLICATION NO. PCT FILING DATE		U.S. SERIAL NUMBERS ASSIGNED (if any)							
EP00/04691 23 May 2000		23 May 2000							
					following attorney(s) and/or at name and registration no.				
SEND CORRESPONDENCE TO:  LAWRENCE A. MAXHAM, REG. NO. 24,483 THE MAXHAM FIRM 750 "B" STREET, SUITE 3100, SAN DIEGO, CA					ALLS TO: A. Maxham No. (619) 233-9004	•			
2 <b>79</b>	FULL NAME OF INVENTOR	FAMILY NAME MASSON			FIRST GIVEN NAME LUCIEN		SECOND GIVEN NAME		
<b>4</b>	RESIDENCE & CITY CITIZENSHIP Maur. CHX		STATE OR FOREIGN COUNTRY SWITZERLAND		COUNTRY OF CITIZENSHIP SWITZERLAND				
	POST OFFICE ADDRESS	POST OFFICE ADDRES Hubrainweg 20a	POST OFFICE ADDRESS Hubrainweg 20a		CITY CH-8124 Maur			STATE & ZIP CODE/COUNTRY SWITZERLAND	
2 0 2	FULL NAME OF INVENTOR	FAMILY NAME			FIRST GIVEN NAME		SECOND GIVEN NAME		
	RESIDENCE & CITIZENSHIP	CITY			STATE OR FOREIGN COUNT	RY	COUNTRY OF CITIZEN	VSHIP	

CITIZENSHIP	Maur. CHX	SWITZERLAND	SWITZERLAND -
POST OFFICE ADDRESS	POST OFFICE ADDRESS Hubrainweg 20a	CITY CH-8124 Maur	STATE & ZIP CODE/COUNTRY SWITZERLAND
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POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
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X ADDITIONAL INVENTOR INFORMATION ATTACHED
I hereby declare that all statements made herein are of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any issuing thereon.

SIGNATURE OF JEVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE: 15,01.02	DATE:	DATE::

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